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TO: Commissioner for Patents  
 Attn: Examiner Lilian Vo  
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FROM: George H. Gates  
 OUR REF.: ST9-99-130  
 TELEPHONE: (310) 642-4146

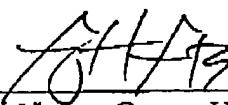
Total pages, including cover letter: 22**PTO FAX NUMBER: (703) 872-9306**

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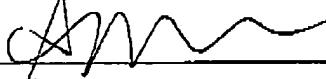
| <b>RESPONSE UNDER 37 C.F.R. §1.111</b> |  |
|--|--|
| Title of Document                      |  |
| Transmited:                            |  |
| Applicants:                            | John Marland Garth et al.  |
| Serial No.:                            | 09/501,493   |
| Filed:                                 | February 9, 2000   |
| Group Art Unit:                        | 2127   |
| Title:                                 | TECHNIQUE FOR DETERMINING AN OPTIMAL NUMBER OF TASKS IN A PARALLEL DATABASE LOADING SYSTEM WITH MEMORY CONSTRAINTS |
| Our Ref. No.:                          | ST9-99-130   |

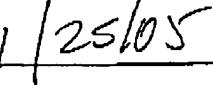
Please charge all fees to Deposit Account No. 09-0460 of IBM Corporation, the assignee of the present application.

By:

  
 Name: George H. Gates  
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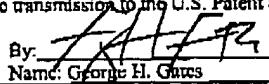
Confirmation No.: 3937  
Due Date: January 26, 2005IN THE UNITED STATES PATENT AND TRADEMARK OFFICE**RECEIVED**  
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Applicants: John Marland Garth et al. Examiner: Lilian Vo  
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JAN 25 2005

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Name: George H. Gates

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Dear Sir:

We are transmitting herewith the attached:

Transmittal sheet, in duplicate, containing a Certificate of Mailing or Transmission under 37 CFR 1.8.  
 Response Under 37 C.F.R. §1.111.

**CLAIMS PRESENT**

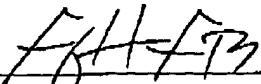
| Claims Remaining:                   | Highest Number Previously Paid For: | Number Extra | Rate       | Fee      |
|-------------------------------------|-------------------------------------|--------------|------------|----------|
| <b>Total Claims</b>                 |                                     |              |            |          |
| 57                                  | 59                                  | 0            | x \$50.00  | = \$0.00 |
| <b>Independent Claims</b>           |                                     |              |            |          |
| 3                                   | 3                                   | 0            | x \$200.00 | = \$0.00 |
| <b>MULTIPLE DEPENDENT CLAIM FEE</b> |                                     |              |            | \$0.00   |
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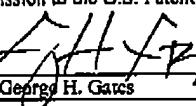
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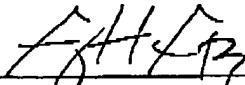
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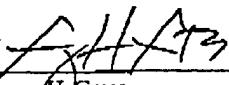
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Dear Sir:

In response to the Office Action dated October 26, 2004, please enter the following remarks in  
the above-identified application.